PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

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1.	,	CLAIMS	AS FILED	S FILED - PART I				SMALL ENTITY		OTHER	R THAN
	FOTAL OLIVIN		(Colun	nn 1)	(Col	lumn 2) TYP			OR		ENTITY
	OTAL CLAIM					RATE	FEE	7	RATE.	FEE	
F	OR	·	NUMBE	NUMBER FILED		BER EXTRA	BASICF	EE 385.00	OR	BASIC FEE	770.00
	OTAL CHARG	EABLE CLAIMS	n	minus 20= *			XS 9		OR	XS18=	
ÍΝ	DEPENDENT	CLAIMS	<u> </u>	minus 3 = *			X43=		OR	X86=	
М	ULTIPLE DEP	ENDENT CLAIM	PRESENT	RESENT				- 	┨ॅ''	 	
*	f the difference	e in column 1 i	s less than :	zero enter	"O" in	column 2	+145=		OR	L	
		TOTAL	- L	J.OR	TOTAL	<u> </u>					
	((Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)				L ENTITY	OR	OTHER SMALL	-
	1 · N	CLAIMS		स्तिति स्	- /	1	1 	ADDI	7 1		ADDI
AMENDMENTA	X	REMAINING AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA	RATE			RATE	TIONAL
	Total	* 36	Minus	- 28	3	= 8	XS 9=		OR	XS18=	144
AME	Independent	1 7	Minus	***	<u> </u>	= 2	X43≔		OR	X86=	172
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								`		1.1.
		* * * * * * * * * * * * * * * * * * * *					+145=		OR	+290=	
			•	* .			TOTA ADDIT FE		OR	TOTAL ADDIT FEE	316
		(Column 1)		(Colum		(Column 3)				٠	-
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIQU PAID F	ER JSU:	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**			XS.e.		OR	X\$18=	
AME	Inaependent	*	Minus	***		=	X-13=	1	1 1	X86=	.
	FIRST PRESE	NTATION OF MI	ULTIPLE DE	TIPLE DEPENDENT CL				+	OR		. ———
			٠				+145=	*	OR	+290=	
•							TOTAL ADDIT FES		OR.	TOTAL ADDIT FEE	· · · · · · · · · · · · · · · · · · ·
		(Column 1)		(Column		(Column 3)		٠.			
AMENDMENT C	· ·	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	RATE	AUÜI- TIONAL • FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		±	X\$ 9=	1 1 5 5		X\$18=	<u> </u>
A L	Independent	*	Minus	***		= .	\ <u>-</u>		OR		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						X43=		OR	X86=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
ovell or Il	* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ADDIT. FEE									TOTAL DDIT. FEE	
Th	e "Highest Numl	ber Previously Paid	For" (Total or	Independent	is the I	nighest number	found in the ap	propriate hox	in colu	mn 1	1